PTO/SB/01A (10-00).

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## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	METHOD AND APPARATUS FOR IMPROVING THE INTESTINAL FL	TREATING ORA OF LIV	WATER FOR USE IN ESTOCK AND POULTRY			
the below named inventor(s), I/we declare that:						
This declaration is directed to:						
The attached application, or						
Application No. <u>10/072,651</u> , filed on <u>February 6, 2002</u> ,						
as amended on (if applicable);						
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;						
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;						
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and						
All statements made herein of my/our own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.						
FULL NAME OF INVENTOR(S)						
Inventor one: John	d'Arc Lorenz, II	Citizen of:	United States			
Signature:		Date:	5/8/02			
Inventor two: Scot	tt A. Schorzman	Citizen of:	United States			
Signature:		Date:				
Inventor three: Troy	T. Johnson	Citizen of:	United States			
Signature:	glift	Date:	4/4/02			
Inventor four: John	n J. Orolin	Citizen of:	United States			
Signature:	egos	Date:	4/12/02			
Additional inventors are being named on additional form(s) attached hereto.						

Burden Hour Statement: This collection of Information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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## **ELECTION AND POWER OF ATTORNEY OR** AUTHORIZATION OF AGENT

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 10/072,651 Application Number February 6, 2002 **Filing Date** John d'Arc Lorenz, Il First Named Inventor 1724 **Group Art Unit Examiner Name** 430117.412C1 Attorney Docket Number

I hereby appoint:  ☑ Practitioners at Seed IP Law Group PLLC  OR			00500				
Practitioner(s) named below:				PATENT TRADEMARK OFFICE			
ĺ		Name	Registration	on Number			
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.							
Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  OR							
Firm or Individual Name							
Address							
Address							
City		St	tate	ZIP			
Country							
Telephone			Fax				
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor							
SIGNATURE of Applicant or Assignee of Record							
Name A.D. HINK							
Signature A H							
Date Date 9 2 cc2							
Submit mul	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						

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